

UNITED STATES DEPARTMENT OF COMMERCE Patent and Trademark Office Address: COMMISSIONER OF PATENTS AND TRADEMARKS Washington, D.C. 20231

APPLICATION NUMBER				
	ER FILING/RECEIPT DAT	E FIRST	NAMED APPLICANT	ATTORNEY DOCKET NO /TITLE
09/421,04	3 10/20/99 M	ASUDA	A SALES	T 503.34403
		elle (film) av en egen elle statistick fra en		503 3410
**************************************	TERRY STOUT AND	PRAID E	JO	NOT ASSIGNED
SUITE 180	· · · · · · · · · · · · · · · · · · ·	INTERPORT Y	~~~\ 	MOI HODIGNED
	H SEVENTEENTH STI	REET /O	, 2009	declaration
ARLINGTON	••	HON 1	6 Page 6	1763
	*	\ \ \ .	DATE MA	H ED.
	•	PATENT		11/09/99
	NOTICE TO EUE M			
	NOTICE TO FILE M	ling Date Grante		
	The state of the s			green by the state of the state
plication Number and F	Filing Date have been assigned	to this application. T	he items indicated b	elow, however, are missing. Applicar
EN I WO MONTHS FRO	OM THE DATE OF THIS NOT	ICE within which to	file all required item	s and nav any fees required below t
abandonment. Extens	sions of time may be obtained	by filing a petition a	ccompanied by the	extension fee under the provisions of torth in 37 CFR 1.16(e) of \$\inf\$ \$65.0
small entity in compli	iance with 37 CFR 1.27 or	\$ \$130.00 for a nor	ie SunchARGE se 1-small entity, mus	t form in 37 CFH 1.16(e) of □ \$65.0 It also be timely submitted in repl
NOTICE to avoid ab	pandonment.		,	and the timesy outsimited in repr
equired items on th	is form are filed within the	period setabove.	the total amount	owed by applicant as a
all entity (statement	t filed) 💢 non-small entity i	s \$ \\ 30		
The statutory basic t	filing fee is:			
☐ missing. ☐ insufficient.		er de vastar a da.	an an ann an t-	
Applicant must subn	nit \$	o complete the had	ic filing foo and/or	file a small entity statement
_claiming such status	S (37 CFH 1.27).	io compiete ine bas	ic illing lee and/or	me a sman emily statement,
		and the state of t		
The following addition	onal claims fees are due:			
		ims over 20.		
\$	fortotal cla	aims over 20.		
\$	fortotal cla forindeper	ndent claims over 3		
\$ \$ \$	fortotal cla forindeper for multiple dependent claim	ndent claims over 3 surcharge.	·.	which fees are due.
\$ \$ Applicant must eith The oath or declara	fortotal cla forindeper for multiple dependent claim er submit the additional clain tion:	ndent claims over 3 surcharge.	·.	which fees are due.
\$ \$ Applicant must eith The oath or declara is missing or uns	for total cla for indeper for multiple dependent claim er submit the additional clain tion: signed.	ndent claims over 3 surcharge.	·.	which fees are due.
\$ \$ Applicant must eith The oath or declara is missing or uns does not cover the	for total cla for indeper for multiple dependent claim er submit the additional clain tion: signed. he newly submitted items.	ndent claims over 3 surcharge. In fees or cancel ad	ditional claims for v	
\$ Applicant must eith The oath or declara is missing or uns does not cover the above Application	fortotal cla forindeper for multiple dependent claim ner submit the additional clain tion: signed. he newly submitted items. on in compliance with 37 CFI on Number and Filing Date is	ndent claims over 3 surcharge. In fees or cancel ad R 1. 63, including re required.	ditional claims for v	n and identifying the application b
\$ Applicant must eith The oath or declara is missing or uns does not cover the above Applicatio The signature(s) to the	fortotal cla forindeper for multiple dependent claim ner submit the additional clain tion: signed. he newly submitted items. on in compliance with 37 CFI on Number and Filing Date is	ndent claims over 3 surcharge. In fees or cancel ad R 1. 63, including re required.	ditional claims for v	n and identifying the application b
\$ Applicant must eith The oath or declara is missing or uns does not cover th An oath or declaration the above Applicatio The signature(s) to the 1.43 or 1.47.	for total cla for indeper for multiple dependent claim er submit the additional clain tion: signed he newly submitted items. on in compliance with 37 CFI on Number and Filing Date is the oath or declaration is/are	ndent claims over 3 surcharge. In fees or cancel add R 1. 63, including refrequired. by a person other t	ditional claims for vesidence information	n and identifying the application by
\$ Applicant must eith The oath or declarate is missing or unstance does not cover the above Application The signature(s) to the application 1.43 or 1.47. A properly signed oa	for total cla for indeper for multiple dependent claim ter submit the additional clain tion: signed he newly submitted items. on in compliance with 37 CFI on Number and Filing Date is the oath or declaration is/are ath or declaration in complian	ndent claims over 3 surcharge. In fees or cancel add R 1. 63, including refrequired. by a person other t	ditional claims for vesidence information	n and identifying the application by
\$ Applicant must eith The oath or declarated is missing or unstance does not cover the above Application The signature(s) to:t 1.43 or 1.47. A properly signed of a Application Number	for total cla for indeper for multiple dependent claim ner submit the additional clain tion: signed he newly submitted items on in compliance with 37 CFI on Number and Filing Date is the oath or declaration is/are ath or declaration in complian and Filing Date, is required.	ndent claims over 3 surcharge. In fees or cancel add R 1. 63, including re- required. by a person other to ace with 37 CFR 1.6	ditional claims for vesidence information han inventor or per 63, identifying the a	n and identifying the application b
\$ Applicant must eith The oath or declarate is missing or uns does not cover the above Applicatio The signature(s) to:t 1.43 or 1.47. A properly signed of Application Number	for total cla for indeper for multiple dependent claim ter submit the additional clain tion: signed he newly submitted items. on in compliance with 37 CFI on Number and Filing Date is the oath or declaration is/are ath or declaration in complian	ndent claims over 3 surcharge. In fees or cancel add R 1. 63, including re- required. by a person other to ace with 37 CFR 1.6	ditional claims for vesidence information han inventor or per 63, identifying the a	n and identifying the application b
\$ Applicant must eith The oath or declarat is missing or uns does not cover the above Applicatio The signature(s) to the 1.43 or 1.47. A properly signed of Application Number The signature of the form	fortotal cla forindeper for multiple dependent claim er submit the additional clain tion: signed. he newly submitted items. on in compliance with 37 CFI on Number and Filing Date is the oath or declaration is/are eath or declaration in compliant and Filing Date, is required. following joint inventor(s) is no	ndent claims over 3 surcharge. In fees or cancel add R 1. 63, including re- required. by a person other to ace with 37 CFR 1.63 hissing from the oat	esidence information han inventor or per 63, identifying the and hor declaration:	n and identifying the application be son qualified under 37 CFR 1.42, application by the above
\$ Applicant must eith The oath or declarate is missing or uns does not cover the above Applicatio The signature(s) to the signature of the formula of the fo	fortotal cla forindeper for multiple dependent claim for submit the additional claim tion: signed. he newly submitted items. on in compliance with 37 CFI on Number and Filing Date is he oath or declaration is/are fath or declaration in compliant and Filing Date, is required. following joint inventor(s) is no on in compliance with 37 CFI ong this application by the abo	ndent claims over 3 surcharge. In fees or cancel add R 1. 63, including representation of the required. By a person other the cather that is a single from the oather that is a single from the native Application Number 1.63 listing the native Application Number 1.65 listing the native 1.65	esidence information han inventor or per 63, identifying the and h or declaration:	n and identifying the application be son qualified under 37 CFR 1.42, pplication by the above and signed by the omitted e, is required.
\$ Applicant must eith The oath or declarate is missing or unserved does not cover the above Application. The signature(s) to the above signature(s) to the signature of the function of the fu	fortotal cla forindeper for multiple dependent claim ner submit the additional clain tion: signed. he newly submitted items. on in compliance with 37 CFI on Number and Filing Date is the oath or declaration in compliant and Filing Date, is required. following joint inventor(s) is no on in compliance with 37 CFI ong this application by the about the fee is required since your	ndent claims over 3 surcharge. In fees or cancel add R 1.63, including receptived. In the person other the ce with 37 CFR 1.63 listing the native Application Numer check was return	esidence information han inventor or per 63, identifying the and hand of all inventors of a	rson qualified under 37 CFR 1.42, pplication by the above and signed by the omitted e, is required.
\$ Applicant must eith The oath or declaration is missing or unsides not cover the above Application The signature(s) to the signature(s) to the signature of the fill an oath or declaration Application Number The signature of the fill an oath or declaration inventor(s), identifying A \$50.00 processing Your filing receipt was	fortotal cla forindeper for multiple dependent claim for submit the additional clain tion: signed he newly submitted items on in compliance with 37 CFI on Number and Filing Date is the oath or declaration in complian and Filing Date, is required. following joint inventor(s) is in on in compliance with 37 CFI on the complia	ndent claims over 3 surcharge. In fees or cancel add R. 1. 63, including re- required. by a person other to ace with 37 CFR 1.6 Inissing from the oat R. 1.63 listing the na ave Application Num check was return ur check was return	esidence information han inventor or per 63, identifying the and hand of all inventors of a	rson qualified under 37 CFR 1.42, pplication by the above and signed by the omitted e, is required.
\$ Applicant must eith The oath or declaration is missing or unside does not cover the above Application. The signature (s) to the signature of the fan oath or declaration number. The signature of the fan oath or declaration inventor(s), identifyir A \$50.00 processing. Your filing receipt was the application was file.	fortotal cla forindeper for multiple dependent claim for submit the additional claim ficial interests and in compliance with 37 CFI for Number and Filing Date is the oath or declaration in compliance following joint inventor(s) is in for in compliance with 37 CFI for in compliance with 37 CFI for in compliance with 37 CFI for this application by the about for the interest since your for mailed in error because your filed in a language other than	ndent claims over 3 surcharge. In fees or cancel add R 1. 63, including re- required. by a person other to ace with 37 CFR 1.6 Inissing from the oat R 1.63 listing the na- ave Application Num check was return ur check was return English.	esidence information han inventor or per 63, identifying the and h or declaration: mes of all inventor or per and Filing Data and without paymented without	rson qualified under 37 CFR 1.42, pplication by the above and signed by the omitted e, is required.
\$ Applicant must eith The oath or declaration the above Application The signature(s) to the signature of the fill an oath or declaration number An oath or declaration number The signature of the fill an oath or declaration inventor(s), identifyir A \$50.00 processing Your filing receipt was the application was file a	fortotal cla forindeper for multiple dependent claim for submit the additional claim for submit the additional claim ficion: ficioned ficion	ndent claims over 3 surcharge. In fees or cancel add R 1.63, including receptived. It is person other to the with 37 CFR 1.63 listing the native Application Number to the ck was return a English.	ditional claims for vesidence information han inventor or per 63, identifying the all inventor mes of all inventor in the and Filing Data and	rson qualified under 37 CFR 1.42, pplication by the above and signed by the omitted e, is required.
\$ Applicant must eith The oath or declaration is missing or unsides not cover the above Application. The signature(s) to the above Application Number. A properly signed of Application Number. The signature of the find an oath or declaration inventor(s), identifying the application was file a previously, submitted.	fortotal cla forindeper for multiple dependent claim for submit the additional claim ficial interests and in compliance with 37 CFI for Number and Filing Date is the oath or declaration in compliance following joint inventor(s) is in for in compliance with 37 CFI for in compliance with 37 CFI for in compliance with 37 CFI for this application by the about for the interest since your for mailed in error because your filed in a language other than	ndent claims over 3 surcharge. In fees or cancel add R 1.63, including receptived. It is person other to the with 37 CFR 1.63 listing the native Application Number to the ck was return a English.	ditional claims for vesidence information han inventor or per 63, identifying the all inventor mes of all inventor in the and Filing Data and	rson qualified under 37 CFR 1.42, pplication by the above and signed by the omitted e, is required.
\$ Applicant must eith The oath or declara is missing or uns does not cover the above Application The signature(s) to the signature of the formula of the following the signature of the signatu	fortotal cla forindeper for multiple dependent claim for submit the additional claim tion: signed. he newly submitted items. on in compliance with 37 CFI on Number and Filing Date is the oath or declaration in complian and Filing Date, is required. following joint inventor(s) is in on in compliance with 37 CFI on this application by the about gree is required since your s mailed in error because you illed in a language other than verified English translation of d, and a statement that the translation of	ndent claims over 3 surcharge. In fees or cancel add R 1.63, including receptived. It is person other to the with 37 CFR 1.63 listing the native Application Number of the application, the application, the application, the application is accurate.	esidence information han inventor or per 63, identifying the all inventor and Filing Date ed without paymented without paymented without paymented (37 CFR 1.52(d))	rson qualified under 37 CFR 1.42, pplication by the above and signed by the omitted e, is required.
\$ Applicant must eith The oath or declarated is missing or unsended and or declarated the above Application. The signature(s) to the signature of the fapplication Number. The signature of the fan oath or declarated inventor(s), identifying the application was fapplicant must file a previously submitted others.	fortotal cla forindeper for multiple dependent claim for submit the additional claim for submit the additional claim ficion: ficioned ficion	ndent claims over 3 surcharge. In fees or cancel add R 1.63, including receptived. It is person other to the with 37 CFR 1.63 listing the native Application Number of the application, the application, the application, the application is accurate.	esidence information han inventor or per 63, identifying the all inventor and Filing Date ed without paymented without paymented without paymented (37 CFR 1.52(d))	rson qualified under 37 CFR 1.42, pplication by the above and signed by the omitted e, is required.
\$ Applicant must eith The oath or declarated is missing or uns does not cover the above Application The signature(s) to the signature(s) to the signature of the fapplication Number The signature of the fan oath or declarated inventor(s), identifying A \$50.00 processing Your filing receipt was the applicant must file a previously submitted OTHER:	fortotal cla forindeper for multiple dependent claim for submit the additional claim tion: signed. he newly submitted items. on in compliance with 37 CFI on Number and Filing Date is the oath or declaration in complian and Filing Date, is required. following joint inventor(s) is in on in compliance with 37 CFI on in compliance with 37 CFI on in compliance with 37 CFI on the submitted in error because your s mailed in a language other than verified English franslation of d, and a statement that the tra estions about this notice to #/	ndent claims over 3 surcharge. In fees or cancel add R. 1. 63, including re- required. by a person other to ace with 37 CFR 1.63 hissing from the oat R. 1.63 listing the na- live Application Num check was return ur check was return English. In the application, the arislation is accurate Attention: Box Missi	esidence information han inventor or per 63, identifying the all inventor and Filing Date ed without paymented without paymented without paymented (37 CFR 1.52(d))	rson qualified under 37 CFR 1.42, pplication by the above s and signed by the omitted e, is required. ent (37 CFR 1.25m)). it.
\$ Applicant must eith The oath or declara is missing or uns does not cover the above Application The signature(s) to the signature of the formula of the following the signature of the following the application of the following the application was followed the application was followed the following following the following the following the following following the following following the following following the following following following the following followi	fortotal cla forindeper for multiple dependent claim for submit the additional claim tion: signed. he newly submitted items. on in compliance with 37 CFI on Number and Filing Date is the oath or declaration in complian and Filing Date, is required. following joint inventor(s) is in on in compliance with 37 CFI on this application by the about gree is required since your s mailed in error because you illed in a language other than verified English translation of d, and a statement that the translation of	ndent claims over 3 surcharge. In fees or cancel add R. 1. 63, including re- required. by a person other to ace with 37 CFR 1.63 hissing from the oat R. 1.63 listing the na- live Application Num check was return ur check was return English. In the application, the arislation is accurate Attention: Box Missi	esidence information han inventor or per 63, identifying the all inventor and Filing Date ed without paymented without paymented without paymented (37 CFR 1.52(d))	rson qualified under 37 CFR 1.42, pplication by the above s and signed by the omitted e, is required. ent (37 CFR 1.25m)). it.
\$ Applicant must eith The oath or declara is missing or uns does not cover the above Application The signature(s) to the signature of the formula of the following the signature of the following the application of the following the application was following the application was following the application was following the signature of the following the application was following the applicant must file a previously submitted others.	fortotal cla forindeper for multiple dependent claim for submit the additional claim tion: signed. he newly submitted items. on in compliance with 37 CFI on Number and Filing Date is the oath or declaration in complian and Filing Date, is required. following joint inventor(s) is in on in compliance with 37 CFI on in compliance with 37 CFI on in compliance with 37 CFI on the submitted in error because your s mailed in a language other than verified English franslation of d, and a statement that the tra estions about this notice to #/	ndent claims over 3 surcharge. In fees or cancel add R. 1. 63, including re- required. by a person other to ace with 37 CFR 1.63 hissing from the oat R. 1.63 listing the na- live Application Num check was return ur check was return English. In the application, the arislation is accurate Attention: Box Missi	esidence information han inventor or per 63, identifying the all inventor and Filing Date ed without paymented without paymented without paymented (37 CFR 1.52(d))	rson qualified under 37 CFR 1.42, pplication by the above and signed by the omitted e, is required.
\$ Applicant must eith The oath or declarated is missing or unsended and or declarated the above Application. The signature(s) to the signature of the fapplication Number. The signature of the fan oath or declarated inventor(s), identifying the application was fapplicant must file applicant must file appreviously submitted other controls.	fortotal cla forindeper for multiple dependent claim for submit the additional claim tion: signed. he newly submitted items. on in compliance with 37 CFI on Number and Filing Date is the oath or declaration in complian and Filing Date, is required. following joint inventor(s) is in on in compliance with 37 CFI on in compliance with 37 CFI on in compliance with 37 CFI on the submitted in error because your s mailed in a language other than verified English franslation of d, and a statement that the tra estions about this notice to #/	ndent claims over 3 surcharge. In fees or cancel add R. 1. 63, including re- required. by a person other to ace with 37 CFR 1.63 hissing from the oat R. 1.63 listing the na- live Application Num check was return ur check was return English. In the application, the arislation is accurate Attention: Box Missi	esidence information han inventor or per 63, identifying the all inventor and Filing Date ed without paymented without paymented without paymented (37 CFR 1.52(d))	rson qualified under 37 CFR 1.42, pplication by the above s and signed by the omitted e, is required. ent (37 CFR 1.25m)). it.

Customer Service Center

503.34403VP2 IN THE UNITED STATES PATENT AND TRADEMARK OFFICE Applicant(s): MASUDA, et al Serial No.: 09/421,043 Filed: October 20, 1999 PLASMA ETCHING APPARATUS AND PLASMA ETCHING For: **METHOD** Attention: APPLICATION DIVISION REPLY TO OFFICE LETTER Assistant Commissioner for Patents Washington, D.C. 20231 November 18, 1999 Sir: In response to the Office Letter dated November 9, 1999, in connection with the above-identified application, attached hereto is a copy of the executed Declaration filed in parent application Serial No. 09/227,332. In addition, a check in the amount of \$130.00 to cover the required surcharge for

filing the declaration is also attached, in accordance with 37 CFR 1.16.

Please charge any shortages in the fees due in connection with the filing of this paper, including extension of time fees, to Deposit Account No. 01-2135 (503.34403VP2) and please credit any excess fees to such deposit account.

Respectfully submitted,

Registration No. 22,466

ANTONELLI, TERRY, STOUT & KRAUS, LLP

MK/cee Attachment(s) (703) 312-6600